PATENT APPLICATION FEE DETERMINATION REC								ORD		~\ ^\	· ~ contet th	umber
Effective December 8, 2004								·-		0/3	H302	5
CLAIMS AS FILED - PART I								SMALL EN	TITY	OR	OTHER SMALL I	
(Column 1)						(Column 2)	1		<del></del>	1		
U.S	S. NATIONAL	STAGE FEES						RATE	FEE	ļ	RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150		ļ	GE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE	300
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100			ther situations = 100 / \$ 200		EXAM. FEE		ļ ·	EXAM. FEE	200
SEARCH FEE			U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400		All other situations = \$ 250 / \$ 500			SEARCH FEE			SEARCH FEE	5W
FEE FOR EXTRA SPEC. PGS.			minus 100 =		/ 50 =			X \$ 125 =	7.	, .	X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			. !	.   minus 20 = .				X \$ 25 =		OR	X \$ 50 =	
INDEPENDENT CLAIMS			7	minus 3 =	•			X \$ 100 =		OR	X \$ 200 =	
MUI	TIPLE DEPEN	DENT CLAIM PRI	SENT					+ \$ 180 =		OR	+ \$ 360 =	
If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II  7-21-05 (Column 1) (Column 2) (Column 3)						_	OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER XUSLY	PRESENT EXTRA		RATE ·	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. [[	Minus	- 21	9	<b>-</b> ⊘ -	.[	X \$ 25 =		OR	X \$ 50 =	0
	Independent	. 2	Minus	***	3	- D		X \$ 100 =		OR	X \$ 200 =	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						L	+\$ 180 =		OR	+ \$ 360 =	0
							•	TOTAL ADDIT.		OR	FEE	O
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		(Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT		HIGHI HUMA PREVIO PAID	EST BER WSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		-	ſ	X \$ 25 =		OR	X \$ 50 =	
	Independent	•.	Minus	444		<b>.</b>		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MI		JLTIPLE DEPENDENT C		LAIM			+\$ 180 =		OR	+\$ 360 =	
		·	7	TOTAL ADDIT. FEE		OR	TOTAL ADOIT. FEE					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".												
	The Highest Nun	ber Previously Paid	For (Total	or independent) is	the hig	hest number found it	h the	appropriate box	in column 1.		•	•

FORM PTO-475 (Rev. 02/2005)

Peterl and Tredemark Office - U.S. DEPARTMENT OF COMMERCE